



7. Administrator of the Bureau of Community Corrections.
  8. Human Resource Coordinator
  9. Unit Managers/designees.
  10. Alcohol/ Drug Counselor.
  11. Probation/Parole Officers.
  12. Investigations staff, or the Human Resources Administrator.
  13. Lab Scientist Supervisor (in the case of questionable samples, short samples or if another sample is required to clear up any discrepancies, problems or questions, or if follow up is needed to clarify a result).
- B. Any staff member who, while on duty, suspects substance abuse by another staff member for any one of the reasons listed below, or observes a staff member acting suspiciously, or sees a staff member using drugs should articulate these concerns to their immediate Supervisor.
- C. Some indicators generating suspicion are:
1. Slurred speech
  2. Alcohol odor.
  3. Trouble maintaining balance
  4. Dilated or constricted pupils
  5. Poor hand-eye coordination
  6. Difficulty comprehending instructions
  7. Absenteeism from work or scheduled appointments
  8. Difficulty staying awake
  9. Irrational behavior
  10. Behavior that is out of character for the individual (e.g.; a very shy person becomes outgoing or boisterous). Personality changes.
  11. Combativeness
  12. Evasiveness
  13. Information from an informant, family member, friend, or local police
  14. Possession of drug related paraphernalia (e.g.; pipes, papers, needles etc.)
  15. Possession or use of prescription drugs without a prescription
  16. After an on duty accident, a staff member may be subject to testing and/or disciplinary procedures based on probable cause.
- These are by no means all of the indicators that may lead to reasonable suspicion testing, and since indicators may be caused by other factors including prescription drugs, physical ailments, stress and simple tiredness; they do not necessarily indicate misuse of substances.**
- D. Requests for urine drug screens will be forwarded to an authorized, lab certified, urine sample collector and handled consistent with sample collection, chain of custody and storage procedures as outlined in this PPD.
- E. No individual shall obtain a sample from another of the opposite sex.
- F. All persons handling the sample shall record all pertinent information relating to the sample, its collection and about the individual that provided the sample on the chain of custody form.
- G. Urine samples will be screened using the Emit® technology on the Olympus Biochemical analyzers, on the ETS, or on the HP GC/MS by Department Of Safety (DOS) Forensic Laboratory staff. Urine drug results will be reported “negative” or “POSITIVE”. A negative result refers to any reading that falls below the cutoff calibrator, and a POSITIVE result refers to any reading that is equal to or above the cutoff calibrator.
- H. For POSITIVE samples, a confirmatory test will be performed on the Syva ETS analyzer, on the Gas Chromatography/Mass Spectroscopy (GC/MS) analyzer, or on a different Olympus analyzer, at the discretion of the Lab Supervisor. There may be an instance when the lab test results are challenged, and the individual may request that the urine sample be split and sent to an outside lab for independent testing. In this case the request has to be made within 30 days of receipt of notification of a POSITIVE result. In order for the lab to send out a split sample, the procedure for Motion of Discovery of Urine Sample for Independent Testing must be followed. In the case of pre-employment and “on suspicion” testing of staff, the request for independent testing must come from an attorney.

- I. All urine samples will be routinely tested for Alcohol, Amphetamines, Benzodiazepines, Cannabinoids (THC-50), Cocaine Metabolite (Benzoylecgonine), Methadone, Opiates, PCP, Creatinine, Specific Gravity, pH and Nitrites. The other tests (Barbiturates, LSD, Propoxyphene (Darvon), Methaqualone, and Tricyclic Antidepressants) will be available on special request. In other words if the supervisor suspects that the individual that they are supervising might be abusing one of these other drugs, please note it on the chain of custody, call the lab, and the lab will try to accommodate your request.
- J. Samples that have been confirmed POSITIVE shall be stored for four (4) months and disposed of thereafter. Samples that test negative are disposed of immediately after all the paperwork for that run has been approved and lab personnel have verified the run as acceptable.
- K. All records of test results will be made a part of the individuals personnel file. Positive test result records will be kept in the State Police Forensic Lab for a period of five (5) years, and negative test result records will be kept in the lab for a period of one (1) year. After these time periods the records will be destroyed.
- L. Because of legal concerns, samples that are not properly sealed and labeled or without proper documentation will be disposed of and a new sample will have to be taken. This standard practice will be enforced consistently, to protect the rights of the persons tested, and the interests of lab personnel and DOC as a whole.
- M. Individuals who test POSITIVE, indicating illicit drug or alcohol ingestion, may be disciplined in accordance with the Personnel Rules and PPD 2.16.
- N. Any individual ordered to submit a urine specimen and who refuses or fails after a two (2) hour period to provide a specimen, is in violation of their employment and may be subject to the same penalties that a positive result could have supported.
- O. Drug abuse tests shall not be utilized for the purpose of harassing or intimidating staff, under any circumstances.
- P. Breath Alcohol testing will be done in accordance with PPD 5.60.

V. PROHIBITIONS:

- A. No staff shall report for duty, remain on duty, hold or draw a weapon, or operate any type of state vehicle while under the influence, in possession of or using alcohol or a controlled or illegal substance. This includes medications containing alcohol. In the case of controlled substances, an exception is made if prescribed by or used pursuant to the recommendation of a physician and the staff is advised by their physician or pharmacist that the substance does not impair their ability to operate a motor vehicle, or perform other safety sensitive functions, if used correctly and in the recommended dosage. All staff shall inform their supervisor of therapeutic (prescribed) drug use that may impair their ability to perform their job functions.
- B. No supervisor having actual knowledge that a staff member is under the influence, in possession of, or using alcohol or a controlled or illegal substance, shall permit that staff member to perform or continue to perform safety sensitive functions. Staff shall not perform safety sensitive functions within four (4) hours after consuming alcohol. Supervisors shall ask whether staff being called back for duty has consumed alcohol within the last four (4) hours and their response shall be logged before they are retested.

VI. TESTING:

- A. The refusal to submit to a required test shall be considered a positive test. (In the case of staff, refusal may constitute willful insubordination and subject the staff member to appropriate disciplinary action up to and including immediate suspension and in the case of pre-employment testing, refusal would put the individual's job application status in immediate jeopardy and/or it would be rejected). Refusal can be defined as failure to provide an adequate breath/urine sample within the specified length of time (see under collection procedure) without a valid medical explanation, conduct obstructing the testing process, tampering with the sample or the test form, failure to show up at the testing site at the designated time, or providing a sample that has been diluted, flushed or adulterated.
- B. The following classes of drugs are subject to testing by urinalysis, with their appropriate cutoff values as established by the National Institute on Drug Abuse (NIDA), Substance Abuse and Mental Health

Services Administration (SAMSHA), the Clinical Improvement Amendments (CLIA), and the DOT (Department of Transportation):

Amphetamine/Methamphetamine	1000 ng/ml
Barbiturates	200 ng/ml
Benzodiazepines	200 ng/ml
Cannabinoids (d 9 THC)	50 ng/ml
Cocaine metabolite	300 ng/ml
Methadone	300 ng/ml
Methaqualone	300 ng/ml
Opiates	300 ng/ml
PCP	25 ng/ml
Propoxyphene	300 ng/ml
Alcohol	.02%--( 20 mg/dl ) (By Alco-Sensor)
Alcohol	.01%-- (10 mg/dl) (in urine)
LSD	0.5 ng/ml

- C. Samples will also be tested for Creatinine, Nitrites, pH, and Specific Gravity to determine whether or not the samples have been diluted, flushed or adulterated. The ranges for these tests are as follows:
- |                  |   |
|------------------|---|
| Creatinine       | Normal urine greater than 20mg/dl                   |
| Specific Gravity | Normal urine greater than 1.003 and less than 1.020 |
| Nitrite          | Normal urine less than 500 mg/dl                    |
| pH               | Normal urine greater than 3 and less than 11        |
- D. In order for the sample to be reported as diluted the Specific Gravity has to be less than 1.003 and the Creatinine has to be less than 20mg/dl TOGETHER. In order for the sample to be reported as adulterated, the Nitrite has to be greater than 500mg/dl, or the pH has to be less than 3 or greater than 11 SEPARATELY. In the event that the sample is diluted or adulterated, the applicant or staff member will be asked to provide a second specimen. Both these specimens will then be retested using EMIT or GC/MS at lower cutoffs and sensitivities. If any traces of drugs are found, the sample will be treated as a POSITIVE. DOT and SAMSHA have made it clear that trying to hide drug use through adulteration and/or dilution is unacceptable behavior. Samples that are BORDERLINE (they fall -1 to -15 units below the screening cutoff) will also be subjected to further testing using EMIT or GC/MS at lower cutoffs and sensitivities. These samples also indicate drug use in the recent past. Because some analyses deteriorate or are lost during freezing and/or storage, sample amounts for a retest of an original specimen are not subject to a specific cutoff requirement, but must provide data sufficient to confirm the presence of the drug or metabolite. Detected levels of a drug below the detection limits established in State Police Forensic Lab procedures, but equal to or greater than the established sensitivity of the evaluated specimen will, as technically appropriate, be reported and considered corroborative of the original positive results.
- E. Alcohol testing is also done through breath analysis or by a urine sample, and is administered by a State Police Forensic Lab trained and certified operator. A result that is less than ( $<$ ) 0.02 (20 ng/ml) alcohol concentration is considered a negative test. If alcohol concentration is 0.02 or greater ( $>$ ), a second or confirmatory test is done on the breathalyzer. Any staff who tests 0.02 or  $>$ , but  $<$  0.04 shall be suspended for a minimum of 24 hours, and the staff member must have a negative result before they can return to duty. A test result of 0.04 (40 ng/ml) or  $>$  is a positive result and by DOT standards, the individual is considered intoxicated. (For the procedures and methods relevant to the use of the Intoximeter Alco-Sensor breath alcohol detection system, please refer to PPD 5.60). In the event that an individual tests positive for alcohol via the breathalyzer, it is advisable to take a urine sample from them and to have an alcohol test done by the State Police Forensic Lab, as a confirmation.
- F. Applicants for positions at DOC will be advised at the time the application is made, that any offer of employment is conditioned upon a negative drug test. This includes staff transferring from other state agencies. Applicants must complete a Drug Testing Release form at the time of application. Applicants shall schedule testing with Bureau of Human Resources. DOC will pay the costs of pre-employment testing.

- G. The Human Resources Administrator/designee, shall inform the job applicant that refusal to complete the required forms, failure to report to the collection site without adequate justification, refusal to submit to testing or providing an adulterated (tampered with), flushed or diluted specimen will be grounds for terminating the employment application process.

VII. SPECIMEN COLLECTION:

- A. In any laboratory testing, the accuracy of the results is dependent entirely on the integrity of the specimen collected. The integrity of the specimen consists of how it was collected, if the right container was used, if the container was correctly labeled, if the individual donating the specimen was properly identified, and if the supporting documentation and paperwork is correct, particularly in reference to chain of custody, and how the specimen was stored, transported, and tested. The following sections deal with these issues.

This policy can only be changed at the discretion of and the authority of the Lab Supervisor.

- B. If there is any discrepancy in the chain of custody, method of collection, method of storage, or evidence of tampering, mislabeled or misidentified specimens, the person or unit responsible will be notified. If the error is clerical and can be rectified easily, the lab will try to do so. If the lab cannot fix the error, the specimen will be discarded. Any refusal on the part of the laboratory to perform the requested tests will be documented.
- C. The Laboratory Supervisor's decision as to whether a specimen can be accepted or rejected is final.

VIII. URINE DRUG TESTING, COLLECTION, AND HANDLING OF SPECIMEN:

- A. Urine samples for drug testing shall be collected by properly trained and authorized personnel. For standardization of the Department of Safety's State Police Forensic Laboratory Procedures and Scientific Practices, the laboratory personnel shall coordinate training specifically for urine collection and other related chain of custody issues.
- B. For those individuals who are asked to provide a sample for testing, they will coordinate when and where they will have a sample taken with the ordering authority.
- C. The following steps are to be taken in establishing and maintaining an appropriate chain of custody and to maintain sample integrity.
  1. A specimen cup and screw lid is removed from their protective plastic wrapping by the applicant or staff.
  2. A numbered label (Attachment 1) providing the "Sample Number", "Submitting Unit", "Date", "Taken By", and "Requested By" is completed by the authorized collector and affixed to the side of the container (NOT on the lid). The sample number links the container, chain of custody form, and the test result together for reporting purposes. This information should be typed or written with a ballpoint pen (no felt tip pens, please!).
  3. A urine test record (Attachment 2) must accompany every sample submitted for drug testing. It must be filled out completely and properly as outlined in Attachment 3 using a ballpoint pen otherwise, no test can be performed.
  4. The authorized collector fills out the General Information Section as well as the Chain of Custody Section. Ensure that the medications taken section is filled out. This will enable the Lab Scientist to make a determination as to the validity of a positive drug screen. The staff member or job applicant may refuse to fill out the medications section. This is acceptable, however, if the specimen comes back POSITIVE, it will be the applicant's or staff member's responsibility to provide documentation (such as a legitimate prescription) to explain the POSITIVE result.
  5. In the case of staff or pre-employment testing, the name of the individual providing the sample, must NOT appear anywhere on the Chain of Custody form. The only identification on the Chain of Custody form will be the sample number that appears on the Specimen label. The name of the individual providing the specimen will only appear on the GOLDENROD copy of the Chain of Custody form that is retained in the Bureau of Human Resources. The submitting unit must keep the GOLDENROD copy in its file for future reference, as the laboratory no longer keeps the files

of the chain of custody for NEGATIVE specimens. The laboratory will provide the submitting unit with the result printout from the machine in the case of all NEGATIVE results. Only the WHITE, CANARY and PINK copies of the urine test record go with the specimen to the State Police Forensic Lab.

6. In the case of all positives: the laboratory retains the WHITE copy. The CANARY copies with results attached are forwarded to the Bureau of Human Resources, while the PINK copies with results attached, are forwarded to the corresponding submitting units or to the requesting authority.
7. After proper identification via a valid picture ID, a valid driver's license, or a passport, the individual to be tested is asked to relinquish all personal property and is escorted to an appropriate rest room facility that has been designated as a collection site. They are asked to wash their hands, and then to provide a specimen with an authorized collector of the same sex observing the sample being voided into the cup from a discreet distance to assure a measure of privacy. (In the case where reasonable suspicion exists or if there is a possibility that the individual may try to adulterate or switch the sample, direct observation may be necessary but can only be done with specific permission from the Commissioner/designee). The individual providing the specimen should not be allowed near a faucet or the toilet bowl when the actual collection of the specimen is taking place. The collector should verify that the sides of the collection cup containing the freshly voided sample are warm to the touch.
8. If the individual cannot give a sample when asked, they will be taken to the office area where they can be observed and will remain in that area for a period of two (2) hours or until they relinquish a sample. The individual will be allowed a SMALL cup of water every 30 minutes to help the process. If the individual refuses to remain in or go to the office area, or if they still refuse to furnish a urine sample after the 2-hour period, they will be informed that they will face disciplinary action for refusal to provide a urine. This can be interpreted to mean that the urine will be DIRTY and the individual can be treated as if they provided a POSITIVE specimen. There may be extenuating medical conditions (e.g.: dehydration, kidney problems, etc.) that preclude them from giving a sample. In such cases the individual must provide the Bureau of Human Resources written evidence from a MD indicating such a condition. When collecting a sample, please make sure that the cup is approximately half full. This will enable the lab to do confirmations and will also provide us with enough specimen in the event that it has to be split for independent testing.
9. The individual who is being tested places the watertight lid on the cup. The cup is handed to the authorized collector. The authorized collector will then check the cup to make sure that there are no pinholes in it and also to make sure that the screw cap is not cross-threaded. The authorized collector then applies a tamper-proof evidence tape in the presence of the individual being tested for the purpose of securing the sample. Please make sure that the evidence tape does not cover the numbered label so that it cannot be read. If the specimen cup is not secured with the evidence tape or if the integrity of the evidence tape is damaged, the sample cannot be tested and will be disposed of accordingly.
10. Next the collector will go over the supporting documentation, chain of custody form and numbered label on the cup with the staff member or applicant to make sure that they agree that the number on the cup matches the number on the label, and that the date, and time of collection are all correct.
11. If samples are not tested within twenty-four (24) hours, they must be kept frozen in the appropriate freezer at each collection site. The samples must be transported to the freezers and frozen within four (4) hours after collection. The samples are placed in the freezer, along with all supporting documentation. The Affidavit (Attachment 4) is filled out as to the numbers on the samples, and initialed by whoever placed it in the freezer. It will also be DOC'S responsibility to check the temperature and general condition of the freezers to ensure sample integrity. If there are any discrepancies or problems with the urine storage freezers, these conditions must be reported to the DOC supervisor. It is possible to submit samples directly to the State Police

Forensic Laboratory whenever laboratory personnel are available to accept them. Please call first to be sure that someone is at the laboratory to receive the samples.

12. When transporting samples to the New Hampshire State Prison freezer or the DOC freezer in Concord, the proper chain of custody must be strictly adhered to. The key to the NHSP freezer, 2R, has to be signed out of the control room. After placing the samples, urine test records, and affidavit inside the freezer, the freezer must be locked and the key returned to the control room. When taking samples to the freezer at DOC on Pleasant St. the key is picked up either at the Bureau of Human Resources or at the Probation and Parole offices.
  13. The contracted courier service will carry urine specimens, prescription drugs from our pharmacy, supplies related to drug testing (i.e.: cups, gloves, tape etc.) and interoffice mail locally and statewide. NHSP/M, NHSP/W, and LRF will have these services provided on a daily basis, and the courier will go to every field office at least once a week. NCF will be serviced twice a week by a contracted courier. For a copy of the courier schedule please call the State Police Forensic Lab. Each division has locked coolers/strong-boxes for urine transport. The courier will swap an empty one for a full one.
  14. Each individual that collects a urine sample will fill out the chain of custody form as established by lab policy and procedure. The samples will be stored in the freezers located at each division. Approximately 1/2 hour prior to the scheduled arrival of the courier, it is the responsibility of each division to pack the urine in the cooler/strong-box that has been provided along with the correctly completed chains of custody forms. The chains have to be complete up to and including the time of placement of the urine specimens in the freezers. Each division is also responsible for completing the Affidavit. This means that whoever packs up the cooler/strong-box must verify that the sample numbers on the Affidavit match the sample numbers on the containers and fill out the top section of the Affidavit. This is essential for court purposes and so that we can complete the chain of custody for you in the event of a positive sample. Please do not fill out the bottom of the affidavit as this is for the lab. Once the individual has filled out the AFFIDAVIT, they will place it on the outside of the cooler/strong-box so that the courier has access to it and can sign off on it. The courier does not have a key to the cooler/strong-box, nor are they ALLOWED to handle the urines. The courier will then transport the urines to the State Police Forensic Lab.
  15. All drug testing supplies and forms must be obtained from the State Police Forensic Lab. If any division requires supplies, please check the courier schedule and call the lab at least 2 days prior to your scheduled pick up date so that we can get them ready for you.
  16. If for any reason you find the need to change, delay, move up or cancel a pick-up on a given day, please call the State Police Forensic Lab for instructions.
- D. All personnel who have access to the urine samples and other laboratory paraphernalia used in drug testing should exercise extra precautionary measures for personal hygiene that would include but not be limited to:
1. Using rubber gloves when handling samples.
  2. Washing hands with soap and water after handling samples.
- E. The DOS State Police Forensic Lab urges all staff handling biological specimens to practice UNIVERSAL PRECAUTIONS (i.e.: everyone is capable of transmitting diseases.)
- F. Whether the sample is positive or negative, or it is being disposed of, you must follow accepted lab procedure for the disposal of biohazardous materials (See QA Manual regarding **Biohazard Waste Disposal**).

**IX: CONDITIONS FOR ACCEPTING OR REJECTING SPECIMENS/TEST RECORDS AND THE APPROPRIATE ACTION TO BE TAKEN:**

- A. A urine sample submitted for drug testing can be rejected if:
1. The evidence tape is not applied correctly (covers the number, or names).
  2. There is a break in the tamper-proof evidence tape, calling into question the integrity of the sample.
  3. The numbered label is taped on top of the lid and not on the side of the cup.
  4. The numbered label is not filled out with complete information.
  5. The Sample # on the test record and that on the numbered label do not match.

6. There is no Sample # on the urine test record.
7. There is less than 2 cc of sample.
8. The "affidavit" form is not filled out.

When a sample is rejected, the urine will be disposed of and will not be analyzed. A No Test form (Attachment 5) will be filled out explaining why the sample is not being tested. A copy of the form is filed in the laboratory with a copy of the Urine Test Record; copies are sent back to the submitting unit with the standards for indicating why the samples are rejected.

- B. Urine test record errors can be returned for correction for the following reasons:
1. Incomplete or illegible General Information data.
  2. Chain of Custody needs to be filled out/completed.

A completed Return Form (Attachment 6) will be sent to the submitting unit explaining the necessary corrections. Copies of the Return forms are filed in the lab's office. The urine sample(s) are put in the lab freezer for future analysis when the corrected test records are returned to the lab. The submitting unit has one month to return the corrected paperwork. If the corrections are not received by the deadline date, the specimen will be disposed of and a note to that effect should be written on the copies of the returned test records.

#### XI. MOTION TO PRODUCE, MOTION FOR DISCOVERY:

Please be advised that because of the sensitive nature of forensic urine drug testing, positive samples stored by us cannot just be given away to any individual for an independent testing. In consultation with our Legal Counsel, the State Police Forensic Lab oratory has made it a policy to have a standard operating procedure on how such samples are released to the applicant's/staff member's attorney.

- A. There should be a court order granting a Motion to Produce, Motion for Discovery or approving a stipulation regarding the urine sample in question. The laboratory will not release the sample unless a copy is received.
- B. Completely and accurately fill out the Certification for Release of Urine Specimen for Independent Testing Form (see Attachment 7).
- C. Laboratory personnel in the presence of the attorney or their legal representative will divide the sample into two volumes. The new cups and numbered labels will be used correspondingly, and tamper-proof evidence tapes will be applied properly to seal the specimen cups. Making sure that the new number is cross-referenced to our original number on our chain of custody form and that the legal representative signs our chain of custody form.
- D. One of the two specimens will be given to the attorney or their legal representative while the second specimen will be retained by the State Police Forensic Laboratory for at least four (4) months.
- E. Release papers must be signed by the applicant's/staff member's attorney or their legal representative and the State Police Forensic Laboratory personnel.
- F. Once the applicant's/staff member's attorney has the specimen in their custody, it is their responsibility to see that the sample is properly stored and the chain of custody is kept intact.
- G. Positive test results that can result in disciplinary action, may be retested only at an approved SAMSHA certified outside laboratory, at the applicant's/staff member's expense. The retest will not delay the disciplinary action, but may be used by DOC to modify the disciplinary action.

#### XII. REPORTING RESULTS/ACTIONS TAKEN:

- A. Job applicants who receive a negative drug test result may continue the employment application process.
- B. Job applicants/staff who receive a positive drug test result for a prescribed and/or controlled substance shall be notified by the Human Resources Administrator of the test results and of the requirement to furnish a written explanation and/or prescription of lawful ingestion of the prescribed and/or controlled substance, within two (2) working days. The decision to proceed with the employment application process will be made after it has been reviewed by the State Police Forensic Lab Supervisor, the DOC



MD, the Human Resources Administrator and if necessary the Commissioner/designee, and will be based upon the job applicants response and test information. Job applicants who refuse to provide a specimen, who provide an adulterated specimen, or who receive a positive drug test result for other than a legitimate prescription or reason will be notified in writing that their application for employment will not be processed further at this time, but that they may re-apply after one year from the date of the letter. Staff tested on suspicion, who refuse to provide a specimen, who provide an adulterated specimen, or who receive a positive drug test result for other than a legitimate prescription or reason will be notified in writing. Staff with substance abuse problems are urged to utilize the services of the Employee Assistance Program (EAP). Upon notification of POSITIVE results, an immediate referral will be made to the EAP. Staff relieved of duty due to POSITIVE drug tests will have the time missed from duty charged against their annual leave, sick time, or compensatory time balances. (This will be determined by the Commissioner and by the Human Resources Administrator on a case-by-case basis). However, participation in the EAP shall not insulate the staff member from disciplinary action (such as suspension or termination) when otherwise warranted.

- C. The results of job applicant/staff member drug tests are strictly confidential and will be submitted to their Supervisor, Human Resources Administrator/designee, or to the Commissioner/designee only, within five (5) business days. Any positive test result shall meet the requirements of the definition of confirmed positive drug test result as set out in this policy.
- D. Return to Work:
  1. Under normal circumstances, staff who have a verified positive test shall be returned to work on their regular job after assessment, a negative return to work drug test and beginning any recommended rehabilitation program. A POSITIVE return to work drug test or refusal to participate in a rehabilitation program will be grounds for immediate dismissal.
  2. If a staff member does not adequately complete rehabilitation or is unable to return to regular duties at the expiration of any approved leave shall terminate the staff member.
  3. Any staff returned to work shall be required to undergo mandatory, unannounced drug testing during working hours at any time within the next 5 years. If any results of drug testing during this time are verified as POSITIVE (using the criteria established in this PPD), the staff member shall be subject to immediate dismissal.

#### REFERENCES:

Standards for the Administration of Correctional Agencies

Second Edition. Standards

**2-CO-1C-20**

Standards for Adult Correctional Institutions

Fourth Edition Standards

**4-4063**

Standards for Adult Community Residential Services

Fourth Edition Standards

**4-ACRS-7C-02**

Standards for Adult Probation and Parole Field Services

Third Edition. Standards

**3-3060**

Other:

**US DOT 49CFR PART 382**

CURRIER/pf

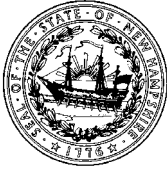
Attachments

Sample # **1234567**  
Submitting Unit

\_\_\_\_\_  
Date \_\_\_\_\_

Taken by \_\_\_\_\_

Requested by \_\_\_\_\_



STATE OF NEW HAMPSHIRE  
*Department of Safety*  
**State Police Forensic Laboratory – Toxicology Group**

**GENERAL INFORMATION:**

1. Sample #: _____ 2. Inmate/System ID: _____ 3. Taken By: _____ 4. Requested By: _____ 5. Date of Collection: _____ 6. Time of Collection: _____ 7. Offender/Applicant: _____ 8. Medications Taken Within the Last 30 Days: _____ _____	9. Submitting Unit: _____ 10. Division: _____ Administration/Personnel _____ NHSP/Men _____ Field Services (SITE: _____ ) _____ Northern NH Correctional Facility _____ NHSP/Women _____ Lakes Region Facility _____ Other (SITE: _____ ) 11. Type of Sample: _____ From Random List                      _____ Other
--	---

**CHAIN OF CUSTODY SECTION:**

DATE	TIME	RELINQUISHED BY	RECEIVED BY	PURPOSE

**DISTRIBUTION:**

White.....  
 Canary.....

Laboratory  
 Offender/Job Applicant File

Pink.....  
 Goldenrod.....

Submitting Unit Copy (post-test)  
 Submitting Unit Copy (pre-test)

DSSP 322

## DIRECTIONS IN USING THE URINE TEST RECORD/CHAIN OF CUSTODY

### A. General Information Section:

1. Sample #: This is the number that is on the label which was placed on the side of the urine cup. (Identification number associated with the individual from whom the specimen is taken.)
2. Inmate/system ID: The offender/job applicant's social security number or inmate #.
3. Taken by: The officer accompanying the offender/job applicant to the rest room where urine sample is voided.
4. Requested by: The officer actually requesting the urinalysis. NOTE: This person may not necessarily be the one taking the sample. For example, only an officer of the same sex must take a sample.
5. Date of collection: The actual date the sample is taken.
6. Time of collection: The actual time the sample is taken.
7. Offender/Applicant: On one line, PRINT the first and last name of the person producing the urine sample. On the second line, the person providing the sample should sign his/her name to acknowledge that the sample # on the urine cup is the same as the sample # on the urine test record and that the specimen is his/hers.
8. Medications taken within the last 30 days: List all drugs that the person is taking including prescription and non-prescription medications. Prescriptions must be verified. If the person is not taking any medications, put NONE.
9. Submitting Unit: This is the specific prison unit, field office or academy that the offender belongs to. If a urine sample is collected at a Jail but that person is supervised by a District Office or Academy, the submitting unit is the name of that District Office or Academy.
10. Division: Check appropriate division.
11. Type of Sample: Check off "From Random List" if the name of the urine donor is listed on the computer-generated monthly random list. For any other urine sample, check off "Other".

### B. Chain of Custody Section:

Any specimen submitted to the State Police Forensic Laboratory cannot be tested without this section completely filled out. The "relinquished by" column must start with the offender providing the sample. The section should provide the complete information regarding the whereabouts of the sample and who has access to it. This is the weakest link in any forensic urine drug-testing program.

### C. Distribution:

Only the white, canary and pink copies are sent to the State Police Forensic Lab with the urine samples.

The Goldenrod copy of the Urine Test Record stays at the submitting unit as a record of urine collections while waiting for results from the lab.

After test completion, urine test records are attached to positive test results and distributed as follows:

1. White: This stays in the lab for centralized record keeping.
2. Canary: This is sent to offender records (for inmates) or the submitting field office.
3. Pink: Returned to the submitting unit.

AFFIDAVIT

I, \_\_\_\_\_, verify that I picked up the samples listed below at,  
 \_\_\_\_\_, on \_\_\_\_/\_\_\_\_/\_\_\_\_, at \_\_\_\_\_ and found  
 (Location) (Date) (Time)  
 them to be intact with the seals unbroken and with the appropriate chain of custody attached, and that I  
 transported them in a locked cooler to \_\_\_\_\_.  
 (Location)

I, \_\_\_\_\_, verify that I picked up the samples listed below at,  
 \_\_\_\_\_, on \_\_\_\_/\_\_\_\_/\_\_\_\_, at \_\_\_\_\_ and found  
 (Location) (Date) (Time)  
 them to be intact with the seals unbroken and with the appropriate chain of custody attached, and that I  
 transported them in a locked cooler to \_\_\_\_\_.  
 (Location)

I, \_\_\_\_\_, verify that I picked up the samples listed below at,  
 \_\_\_\_\_, on \_\_\_\_/\_\_\_\_/\_\_\_\_, at \_\_\_\_\_ and found  
 (Location) (Date) (Time)  
 them to be intact with the seals unbroken and with the appropriate chain of custody attached, and that I  
 transported them in a locked cooler to \_\_\_\_\_.  
 (Location)

SAMPLE NUMBERS & INITIALS (of person dropping off samples):

1 _____.	26 _____.	51 _____.	76 _____.
2 _____.	27 _____.	52 _____.	77 _____.
3 _____.	28 _____.	53 _____.	78 _____.
4 _____.	29 _____.	54 _____.	79 _____.
5 _____.	30 _____.	55 _____.	80 _____.
6 _____.	31 _____.	56 _____.	81 _____.
7 _____.	32 _____.	57 _____.	82 _____.
8 _____.	33 _____.	58 _____.	83 _____.
9 _____.	34 _____.	59 _____.	84 _____.
10 _____.	35 _____.	60 _____.	85 _____.
11 _____.	36 _____.	61 _____.	86 _____.
12 _____.	37 _____.	62 _____.	87 _____.
13 _____.	38 _____.	63 _____.	88 _____.
14 _____.	39 _____.	64 _____.	89 _____.
15 _____.	40 _____.	65 _____.	90 _____.
16 _____.	41 _____.	66 _____.	91 _____.
17 _____.	42 _____.	67 _____.	92 _____.
18 _____.	43 _____.	68 _____.	93 _____.
19 _____.	44 _____.	69 _____.	94 _____.
20 _____.	45 _____.	70 _____.	95 _____.
21 _____.	46 _____.	71 _____.	96 _____.
22 _____.	47 _____.	72 _____.	97 _____.
23 _____.	48 _____.	73 _____.	98 _____.
24 _____.	49 _____.	74 _____.	99 _____.
25 _____.	50 _____.	75 _____.	100 _____.

I, \_\_\_\_\_ (NHSP FL staff.), verify that I received the specimens listed  
 Above from, \_\_\_\_\_, at STATE POLICE FORENSIC LAB (LRF, MURPHY  
BLDG.) on \_\_\_\_/\_\_\_\_/\_\_\_\_, at \_\_\_\_\_, in a locked cooler and that all the specimens and chain of custody  
 (Date) (Time)  
 forms were intact and all the seals were unbroken.



STATE OF NEW HAMPSHIRE  
DEPARTMENT OF SAFETY  
State Police Forensic Laboratory

Attachment 5

DATE: \_\_\_\_\_  
SUBJECT: SPECIMEN REJECTION  
TO: \_\_\_\_\_  
\_\_\_\_\_

The Urine sample(s) listed below have been rejected and **CANNOT BE TESTED** for the reason(s) checked:

- ☐ Evidence tape not applied correctly
- ☐ Evidence tape seal broken.
- ☐ Numbered specimen label missing
- ☐ Numbered specimen label placed on cap, not on side of urine cup.
- ☐ Sample number on the Chain of Custody Form not legible
- ☐ Sample number written on Chain of Custody Form does not match the numbered label on the urine cup.
- ☐ Sample number(s) not written on the Affidavit
- ☐ Affidavit filled out incorrectly.
- ☐ Other: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**PLEASE NOTE ERRORS AND COLLECT ANOTHER SAMPLE.** Thank you for your cooperation.

Sample #'s:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signed by: \_\_\_\_\_



STATE OF NEW HAMPSHIRE  
DEPARTMENT OF SAFETY

Attachment 6

*State Police Forensic Laboratory*

DATE: \_\_\_\_\_

SUBJECT: REQUEST FOR CORRECTIONS

TO: \_\_\_\_\_  
\_\_\_\_\_

The Urine Test Record(s) is (are) returned to you for the reason(s) checked below:

- ☐ Incomplete "General Information" data.
- ☐ "Chain of Custody" needs to be filled out/completed.
- ☐ Offender's name is not printed/legible.
- ☐ Offender's ID number is not legible
- ☐ Verify that the inmate/system ID number written is correct for this offender
- ☐ Other: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please make the corrections on the Urine Test Record and initial the correction. When completed, forward the Urine Test record and a copy of this form to the Forensic Laboratory (LRF) on or before \_\_\_\_\_. Due to limited storage space, if we do not receive the paperwork by this date, we will dispose of the urine without testing the sample.

Sample #'s: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signed by: \_\_\_\_\_



**STATE OF NEW HAMPSHIRE**  
**DEPARTMENT OF SAFETY**  
 State Police Forensic Laboratory

**CERTIFICATION FOR RELEASE OF URINE SPECIMEN FOR INDEPENDENT TESTING**

This is to certify that Sample # \_\_\_\_\_ has been divided into two (2) volumes by \_\_\_\_\_ in the presence of \_\_\_\_\_. Each urine aliquot has been placed in new specimen cups with numbered labels Sample # \_\_\_\_\_ and Sample # \_\_\_\_\_. New tamper-proof evidence tapes were applied.

Sample # \_\_\_\_\_ has been endorsed to the Defense Counsel for independent testing while Sample # \_\_\_\_\_ is being retained by the State Police Forensic Laboratory, State of New Hampshire Department of Safety.

It is important that samples must be stored frozen if not tested within twenty-four (24) hours.

Sample #: \_\_\_\_\_

Sample #: \_\_\_\_\_

Received By: \_\_\_\_\_

Received By: \_\_\_\_\_

Date: \_\_\_\_\_

Date: \_\_\_\_\_

Time: \_\_\_\_\_

Time: \_\_\_\_\_